## VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm Breath Test Instrument State of Alaska

JUL 2 1 2010

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Supervi	sor/Operator Performing the Verification Procedure Name Tracy E. Murphy		7050	130192 V Date 06/19/2010 V
A	Agency Juneau Police Dept		Phon	e #_(907) 526-0600
	Instrument Location Juneau Police D	ept		
В	Alco S/N x172938 ✓ Target V	alue079 ∨1	High Pressure	1225
	Alco Test Values 1st Alco	$\frac{.081}{2^{\text{nd}} \text{ Alco}}$		
	Signature Signature	1		COB
	. (	OVER)		723/10

(Do Not write in the area below)

- I, Nita J. Bolz, after being first duly sworn, depose and state as follows:
- (1) I am a Forensic Scientist IV at the State of Alaska Scientific Crime Detection Laboratory.
- (2) The Alaska Scientific Crime Detection Laboratory is an entity within the Department of Public Safety.
- (3) I am the Scientific Director of the State Breath Alcohol Program.
- (4) In that capacity, I am responsible for overseeing the breath alcohol program, including assuring that persons responsible for verifying the calibration of instruments are properly trained and qualified. I also am responsible for maintaining the records of the program.
- (5) The attached verification is a true and accurate verification of calibration that reflects a regularly conducted and regularly recorded activity of the breath alcohol program performed by a person trained and qualified to conduct the verification.

(6) The referenced instrument is certified for evidentiary use in the State of Alaska.

Nita J Bolz Scientific Director

State Breath Alcohol Program

Subscribed and sworn before me this

Notary Seal Stam

Carolyn M. Noland

Notary Public, State of Alaska

Commission Expires with Office

BT9 06/03



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of DataMaster cdm breath Test Instrument State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

DataMaster cdm S/N

130192

(CONTINUED FROM FRONT PAGE)

TAPE THE TEST STRIP FROM THE NONDRINKING SUBJECT TEST AND THE DIAGNOSTIC CHECK IN THE MARKED BOXES.

## NONDRINKING SUBJECT TEST

## DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY DATAMASTER cdm 130192

JUNE 19, 2010

OPERATOR'S NAME: MURPHY/TRACY/E

OPERATOR'S NUMBER: 7252

SUBJECT'S LAST NAME:

SUBJECT'S FIRST NAME/MI :

VOC

O.L. #: VOC

DEPT/AGENCY: JNU1 CASE/REPORT: VOC

TEST TYPE: V

BLANK TEST

ALCO TARGET VALUE: .079

ALCO TARGET

ALCO S/N: X172938

--- BREATH ANALYSIS ---

19:33

19:34

.080 19:29 .000 VERIFIED 19:31 .081 19:31

.000

.081

.000

ALCO TV 30.33 in .000 BLANK TEST SUBJECT SAMPLE .000 BLANK TEST

.079 ADJUSTED FOR 30.33 in

ALCO TV 30.33 in BLANK TEST

INTERNAL STANDARD

ALASKA DEPARTMENT OF PUBLIC SAFETY DATAMASTER cdm 130192

JUNE 19, 2010 TIME 19:26

--- DIAGNOSTIC CHECK ---

COMPUTER:

OKAY

PROGRAM:

OKAY

SOFTWARE DATE:

02/20/01

HEATERS

SAMPLE CHAMBER: BREATH TUBE:

49c 43c

BAROMETER:

30.33 in

FLOW DETECTOR:

OKAY

PUMP

19:30 HIGH SPEED:

OKAY

DETECTOR:

OKAY

19:32 FILTERS:

OKAY

19:33 QUARTZ STANDARD:

OKAY

CALIBRATION:

OKAY

BT9 06/03

PRINTER TEST !"#\$%&'()\*+,-./0123456789:;<=>?@ABCDEFHIJKLMNOPQRSTUVWXYZ[\]^\_`abcdefghijklmr pqrstuvwxyz{|}~